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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/723,777 11/26/2003 Bruce Kevin Wagoner 4237-101 9677

TITLE OF INVENTION: DERMATOLOGICAL COMPOSITION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$ 755	\$300	₹ 07/15/208	9 NGEBREN2 00000	09/01/2009	
EXAN	MINER	ART UNIT	CLASS-SUBCLASS	01 FC:250		•	
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CFR 1.363). Change of correst Address form PTO/S Fee Address* ind PTO/SB/47; Rev 03-6 Number is required. 3. ASSIGNEE NAME A PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSIGNAME ARMONY LA	AND RESIDENCE DATA less an assignee is ident th in 37 CFR 3.11. Comp GNEE BS, INC.	nge of Correspondence "Indication form ed. Use of a Customer A TO BE PRINTED ON ified below, no assignee detion of this form is NO	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patient artolisted, no name will be THE PATENT (print or typicata will appear on the patra substitute for filling and (B) RESIDENCE: (CITY	3 registered patent attornively, e firm (having as a member agent) and the names of up meys or agents. If no name printed. De) atent. If an assignee is ideassignment. and STATE OR COUNTY RTH CAROLINA	eys INTELLEC that a TECHNOLO to be is 3 contified below, the documents	J. HULTQUIST TUAL/PROPERTY OGY LAW ument has been filed for	
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